

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Sachie SHIZUKA, et al.

Serial No: 10/047,445

Filed: January 9, 2002

For: DEVICE ENVIRONMENT CONFIGURATION
SYSTEMS, DEVICE ENVIRONMENT
CONFIGURATION METHODS, AND DATA STORAGE
MEDIA THEREFOR

Art Unit: 1746

Examiner: Cottingham, J.R.

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Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450, on
August 24, 2005

Date of Deposit

Rebecca Maiden

Name

Signature

08/24/05
Date

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☐ Small entity status has been claimed. See 37 CFR § 1.27.
- ☐ A certified copy of ___ Patent Application No. ___ filed ___ from which priority is claimed under 35 U.S.C. § 119 is enclosed.
- ☐ A Notice Of Change Of Attorney's Address and Associate Power Of Attorney is enclosed.
- ☒ No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE		ADD'L FEE DUE
TOTAL CLAIMS FEE	40	-20	53 **	0	LG=\$50 SM=\$25	\$(FEE)	\$ 0
INDEPENDENT CLAIMS FEE	4	-3	6 ***	0	LG=\$200 SM=\$100	\$(FEE)	\$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$360 SMALL ENTITY FEE = \$180		\$ 0
ADDITIONAL SIZE FEE (IF ANY) (TOTAL PAGES OF SPEC AND DRAWINGS TOGETHER)				\$250 FOR EACH ADDITIONAL 50 SHEETS			\$ 0
TOTAL							\$ 0

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☐ A check in the amount of \$-0- to cover the additional claims fee is enclosed. **A copy of this sheet is enclosed.**
- ☐ A check in the amount of \$-0- to cover the extension fee is enclosed. **A copy of this sheet is enclosed.**
- ☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. **A copy of this sheet is enclosed.**
- ☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
- ☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,
HOGAN & HARTSON L.L.P.

By:

DARIUSH G. ADLI

Registration No. 51,386

Attorney for Applicant(s)

Date: August 24, 2005

Biltmore Tower
500 South Grand Avenue, Suite 1900
Los Angeles, California 90071
Telephone: 213 337-6700
Facsimile: 213 337-6701

Appl. No. 10/047,445
Amdt. Dated August 24, 2005
Reply to Office Action of May 24, 2005

Attorney Docket No. 81747.0211
Customer No.: 26021



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:
Sachie SHIZUKA, et al.
Serial No: 10/047,445
Confirmation No.: 1065
Filed: January 9, 2002
For: DEVICE ENVIRONMENT
CONFIGURATION SYSTEMS, DEVICE
ENVIRONMENT CONFIGURATION
METHODS, AND DATA STORAGE
MEDIA THEREFOR

Art Unit: 2116

Examiner: Cottingham, J.R.

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Name

Rebecca Maiden 08/24/05

Signature

Date

AMENDMENT

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action dated May 24, 2005, please amend the above-referenced application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 17 of this paper.